

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46868

FILED  
Feb 05, 2009  
Secretary of State

**Entity Name:** PARKWAY PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1799 FAIRWAY DR  
AMELIA ISLAND, FL 32034 US

**New Principal Place of Business:**

**Current Mailing Address:**

1799 FAIRWAY DR  
AMELIA ISLAND, FL 32034 US

**New Mailing Address:**

**FEI Number:** 59-3694902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHILDS, NEIL W  
1791 FAIRWAY DRIVE  
AMELIA ISLAND, FL 32034 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: CHILDS, NEIL  
Address: 1799 FAIRWAY DR  
City-St-Zip: AMELIA ISLAND, FL

Title: PD ( ) Delete  
Name: RUATTLEBAUM, JOSEPH  
Address: 1786 FAIRWAY DR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition  
Name: CHILDS, NEIL W  
Address: 1799 FAIRWAY DR  
City-St-Zip: AMELIA ISLAND, FL 32034 US

Title: PD (X) Change ( ) Addition  
Name: KOURIE, MICHAEL  
Address: 1789 FAIRWAY DR  
City-St-Zip: AMELIA ISLAND, FL 32034 US

Title: VPD ( ) Change (X) Addition  
Name: QUATTLEBAUM, JOSEPH  
Address: 1786 FAIRWAY DR  
City-St-Zip: AMELIA ISLAND, FL 32034 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEIL W. CHILDS

STD

02/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date